EIGHTY-FOURTH GENERAL ASSEMBLY 2012 REGULAR SESSION DAILY HOUSE CLIP SHEET

APRIL 4, 2012

HOUSE FILE 2450

H-8408

Amend House File 2450 as follows:

2 1. By striking everything after the enacting clause 3 and inserting:

4 <Section 1. AUTOMATED TRAFFIC LAW ENFORCEMENT 5 PROGRAMS ---- MORATORIUM ON NEW LOCAL ORDINANCES.

- 1. During the period beginning on the effective date of this Act and ending June 30, 2013, a local authority shall not adopt a new ordinance for the implementation of an automated traffic law enforcement program. A local authority that has adopted such an ordinance prior to the effective date of this Act may continue to use automated traffic law enforcement systems according to the terms of the authorizing ordinance.
- 2. For purposes of this section, "automated traffic law enforcement system" means a device with one or more sensors working in conjunction with a traffic control signal or device or a speed-measuring device to produce recorded images of vehicles being operated in violation of traffic or speed laws. "Automated traffic law enforcement system" does not include a device operated in the presence of a peace officer or a device mounted on a school bus and operated in the presence of the driver of the school bus.
- 25 Sec. 2. AUTOMATED TRAFFIC LAW ENFORCEMENT SYSTEMS 26 STUDY.
- 1. The center for transportation research and education at Iowa state university, in consultation with the department of transportation and the department of public safety, shall conduct a comprehensive study regarding the use and effectiveness of automated traffic law enforcement systems. The elements of the study shall include but are not limited to the following:
- 35 a. An overview of the history of automated traffic 36 law enforcement systems nationally and an overview of 37 the impact of the systems on traffic safety and traffic 38 law enforcement in areas of the country in which the 39 systems have been used.
- b. A compilation and analysis of available data regarding the use of automated traffic law enforcement systems in this state and in other states to evaluate the effect of the systems on accident rates including the number, type, and severity of accidents and the property damage, injuries, and fatalities resulting from such accidents.
- c. Information regarding the manner in which automated traffic law enforcement systems are regulated by various states.
- 50 d. Identification of potential strategies to H-8408 -1-

Page 2

- 1 address the existence and impact of automated traffic
- 2 law enforcement programs in this state. To the
- 3 extent possible, the study shall evaluate the types
- 4 of restrictions that might be imposed on local
- 5 authorities by the state to limit the number and
- 6 scope of such programs or to enhance the effectiveness
- 7 of such programs. Possible strategies to consider
- 8 include requiring legislative approval for the use of
- 9 automated traffic law enforcement systems, requiring a
- 10 local authority to prove a need for the systems as a
- 11 condition for adopting an ordinance authorizing their
- 12 use, imposing statutory limits on civil penalties,
- 13 and other similar strategies for the regulation of
- 14 automated traffic law enforcement programs.
- .5 2. Local authorities that are using automated
- 16 traffic law enforcement systems as of the effective
- 17 date of this Act shall provide information at the
- 18 request of the center for transportation research and
- 19 education to assist the center in conducting the study
- 20 required under this section.
- 3. The center for transportation research and
- 22 education shall submit a report of its study to the
- 23 general assembly by January 15, 2013.
- 24 Sec. 3. EFFECTIVE UPON ENACTMENT. This Act, being
- 25 deemed of immediate importance, takes effect upon
- 26 enactment.>
- 27 2. Title page, line 1, by striking <prohibiting>
- 28 and inserting providing for a study concerning>

By H. MILLER of Webster WOLFE of Clinton

H-8408 FILED APRIL 3, 2012

HOUSE FILE 2435

H-8411

- 1 Amend House File 2435 as follows:
- 2 1. Page 26, after line 1 by inserting:
- 3 <6. The department of human services shall increase
- 4 by $1\overline{0}$ percent the amounts in the schedule of basic
- 5 needs used to determine the cash assistance grants
- 6 provided to participants in the family investment
- 7 program. The resulting amounts shall be rounded to the
- 8 nearest whole dollar. The department shall implement
- 9 the increase commencing with the fiscal year beginning
- 10 July 1, 2013.>
- 11 2. By renumbering as necessary.

By BERRY of Black Hawk

H-8411 FILED APRIL 3, 2012

H - 8409

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1 Amend Senate File 2112, as passed by the Senate, as
 2 follows:
      1. Page 1, before line 1 by inserting:
      <Section 1. Section 321.30, subsection 2, Code
 4
 5 2011, is amended to read as follows:
      2. a. Unless otherwise provided for in this
 7 chapter, the department or the county treasurer shall
 8 refuse registration and issuance of a certificate of
 9 title unless the vehicle bears a manufacturer's label
10 pursuant to 49 C.F.R. pt. 567 certifying that the
11 vehicle meets federal motor vehicle safety standards.
      b. A military vehicle, other than a vehicle that
12
13 runs on continuous tracks or wheels and tracks, that
14 was originally manufactured for and sold directly to
15 the armed forces of the United States in conformity
16 with contractual specifications, as provided in
17 49 C.F.R. { 571.7, may be registered and issued a
18 certificate of title if the owner provides satisfactory
19 evidence to the department that the vehicle is
20 substantially in compliance with federal motor vehicle
21 safety standards. The department may adopt rules as
22 necessary concerning the registration and titling of
23 military vehicles in accordance with this chapter.>
      2. Title page, line 1, after <Act> by inserting
25 < relating to transportation, including by providing for
26 the registration and titling of military vehicles and>
      3. By renumbering as necessary.
By WINDSCHITL of Harrison
                                     TJEPKES of Webster
  CHAMBERS of O'Brien
                                    RASMUSSEN of Buchanan
   LYKAM of Scott
H-8409 FILED APRIL 3, 2012
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H-8410

- 1 Amend <u>Senate File 2112</u>, as passed by the Senate, as 2 follows:
- 3 1. Page 2, after line 4 by inserting:
- 4 <Sec. ___. VETERAN IDENTIFICATION --
- 5 ALLOCATION. Notwithstanding section 35A.11, the
- 6 commission of veterans affairs may allocate up to
- 7 fifty thousand dollars from the veterans license fee
- 8 fund created in section 35A.11 to the department of
- 9 transportation for the fiscal year beginning July 1,
- 10 2012, and ending June 30, 2013, or so much thereof as
- 11 is necessary, to be used for the implementation of this
- 12 Act. Any moneys allocated pursuant to this section
- 13 that remain unencumbered or unobligated at the close of
- 14 the fiscal year shall revert to the veterans license
- 15 fee fund created in section 35A.11.>
- 16 2. Title page, line 3, after <status> by inserting
- 17 <and allowing the commission of veterans affairs to
- 18 allocate certain funds>
- 19 3. By renumbering as necessary.

By WINDSCHITL of Harrison

H-8410 FILED APRIL 3, 2012

H-8412

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1 Amend Senate File 2293, as amended, passed, and
 2 reprinted by the Senate, as follows:
      1. By striking page 11, line 8, through page 15,
 4 line 14, and inserting:
      <Sec. . Section 514J.102, subsections 1 and 10,
 6 Code Supplement 2011, are amended to read as follows:
      1. "Adverse determination" means a determination
 8 by a health carrier that an admission, availability
 9 of care, continued stay, or other health care service
10 that is a covered benefit has been reviewed and,
11 based upon the information provided, does not meet the
12 health carrier's requirements for medical necessity,
13 appropriateness, health care setting, level of
14 care, or effectiveness, and the requested service or
15 payment for the service is therefore denied, reduced,
                   "Adverse determination" includes a
16 or terminated.
17 denial of coverage for a dental care service that is
18 a covered benefit that has been reviewed and, based
19 upon the information provided, does not meet the health
20 carrier's requirements for medical necessity, and
21 the requested service or payment for the dental care
22 service is therefore denied, reduced, or terminated,
23 in whole or in part. "Adverse determination" does not
24 include a denial of coverage for a service or treatment
25 specifically listed in plan or evidence of coverage
26 documents as excluded from coverage.
      10. "Covered benefits" or "benefits" means those
28 health care services and dental care services to which
29 a covered person is entitled under the terms of a
30 health benefit plan.
31
      Sec. . Section 514J.102, Code Supplement 2011,
32 is amended by adding the following new subsection:
     NEW SUBSECTION. 11A. "Dental care services" means
34 services for diagnostic, preventive, maintenance, and
35 therapeutic dental care that is provided under chapter
36 153.>
37
      2. Page 21, by striking lines 1 through 12.
      3. Page 21, by striking lines 17 and 18.
38
39
      4. By renumbering as necessary.
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By PETTENGILL of Benton

H-8412 FILED APRIL 3, 2012

- 1 Amend Senate File 2293, as amended, passed, and 2 reprinted by the Senate, as follows: 1. Page 18, after line 12 by inserting: <Sec. . Section 522B.12, Code 2011, is amended 4 5 by adding the following new subsection: NEW SUBSECTION. 5. A person who enrolls in a 7 qualified health benefit plan offered in this state 8 pursuant to federal law has the option to utilize the 9 services of an insurance producer licensed pursuant 10 to chapter 522B. Qualified health benefit plans 11 offered pursuant to federal law shall pay licensed 12 insurance producers for their services at a level that 13 is commensurate with the compensation paid to insurance 14 producers for the placement, renewal, or enrollment of 15 persons in health benefit plans offered pursuant to 16 state law.> 2. Page 19, after line 14 by inserting: 17 <Sec. . NEW SECTION. 522D.1 Definitions. 18 19 As used in this chapter, unless the context 20 otherwise requires: "Commissioner" means the commissioner of 1. 2.1 22 insurance. "Navigator" means a public or private entity 23 24 or an individual that is qualified and licensed, if 25 appropriate, to engage in the activities and meet the 26 standards described in 45 C.F.R. { 155.210. Sec. . NEW SECTION. 522D.2 License required. 27 28 A person shall not act as a navigator in this state 29 unless the person is licensed by the commissioner as 30 required in this chapter. Sec. . NEW SECTION. 522D.3 Actions prohibited. 31 A navigator shall not perform the functions of a 32 33 person required to be licensed as an insurance producer 34 under chapter 522B unless the navigator is licensed 35 as a navigator pursuant to this chapter and as an 36 insurance producer pursuant to chapter 522B. NEW SECTION. 522D.4 Application for Sec. . 38 examination. 1. An individual applying for a navigator license 39 40 shall pass a written examination. The examination 41 shall test the knowledge of the individual concerning 42 the duties and responsibilities of a navigator and the 43 insurance laws and regulations of this state. 44 commissioner shall adopt rules pursuant to chapter 45 17A related to the development and conduct of the
- 2. The commissioner may make arrangements, 48 including contracting with an outside testing service 49 or other appropriate entity, for administering 50 examinations and collecting fees.

46 examination.

40

- 1 3. An individual applying for an examination shall 2 remit a nonrefundable fee as established by rule of the 3 commissioner.
- 4 4. An individual who fails to appear for the 5 examination as scheduled or fails to pass the 6 examination shall reapply for an examination and remit 7 all required fees and forms before being rescheduled 8 for another examination.
- 9 Sec. ___. <u>NEW SECTION</u>. 522D.5 Application for 10 license.
- 11 1. A person applying for a navigator license shall 12 make application to the commissioner on an application 13 form approved by the commissioner and declare under 14 penalty of refusal, suspension, or revocation of the 15 license that the statements made on the application 16 are true, correct, and complete to the best of the 17 individual's knowledge and belief. Before approving 18 the application, the commissioner shall find all of the 19 following:
- 20 a. The individual is at least eighteen years of 21 age.
- 22 b. The individual has not committed any act that is 23 a ground for denial, suspension, or revocation as set 24 forth in section 522D.7.
- 25 c. The individual has paid the license fee, as 26 established by the commissioner by rule.
- d. The individual has successfully completed the initial training and education program for a license as established by the commissioner by rule.
- 30 e. The individual has successfully passed the 31 examination as provided in section 522D.4.
- f. In order to protect the public interest, the individual has the requisite character and competence to receive a license as a navigator.
- 2. A public or private entity acting as a navigator may elect to obtain a navigator license. Application shall be made using the application form approved by the commissioner. Prior to approving the application, the commissioner shall find both of the following:
 - a. The entity has paid the appropriate fees.
- b. The entity has designated a licensed navigator responsible for the entity's compliance with this as chapter.
- 44 Sec. . NEW SECTION. 522D.6 License.
- 1. A person who meets the requirements of sections 46 522D.4 and 522D.5, unless otherwise denied licensure 47 pursuant to section 522D.7, shall be issued a navigator 48 license. A navigator license is valid for three years.
- 49 2. A navigator license remains in effect unless 50 revoked or suspended as long as all required fees are H-8414 -2-

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- 1 paid and continuing education requirements are met by 2 any applicable due date. A navigator is required to 3 complete continuing education requirements required by 4 law in order to be eligible for license renewal.
- 5 3. A licensed navigator who is unable to comply 6 with license renewal procedures due to military service 7 or other extenuating circumstances may request a waiver 8 of those procedures. The licensed navigator may also 9 request a waiver of any examination requirement or any 10 other penalty or sanction imposed for failure to comply 11 with renewal procedures.
- 12 4. The license shall contain the licensee's 13 name, address, personal identification number, the 14 date of issuance, the expiration date, and any other 15 information the commissioner deems necessary.
- 5. A licensee shall inform the commissioner by any means acceptable to the commissioner of a change of legal name or address within thirty days of the change. Failure to timely inform the commissioner of a change of legal name or address may result in a penalty as 21 specified in section 522D.7.
- 22 6. The commissioner shall require by rule that 23 a licensed navigator furnish a surety bond or other 24 evidence of financial responsibility that protects all 25 persons against wrongful acts, misrepresentations, 26 errors, omissions, or negligence of the navigator.
- 7. In order to assist with the commissioner's
 duties, the commissioner may contract with a
 nongovernmental entity, including the national
 association of insurance commissioners or any affiliate
 or subsidiary the national association of insurance
 commissioners oversees, to perform any ministerial
 functions, including the collection of fees, related
 having to navigator licensing that the commissioner deems
 appropriate.
- 36 Sec. ___. <u>NEW SECTION</u>. 522D.7 License denial, 37 nonrenewal, or revocation.
- 1. The commissioner may place on probation, 39 suspend, revoke, or refuse to issue or renew a 40 navigator's license or may levy a civil penalty as 41 provided in section 522D.8 for any one or more of the 42 following causes:
- 43 a. Providing incorrect, misleading, incomplete, 44 or materially untrue information in the license 45 application.
- 46 b. Violating any insurance laws, or violating any 47 regulation, subpoena, or order of the commissioner or 48 of a commissioner of another state.
- c. Obtaining or attempting to obtain a license through misrepresentation or fraud.

- d. Improperly withholding, misappropriating, or converting any moneys or properties received in the course of doing insurance business.
- 4 e. Intentionally misrepresenting the terms of an 5 actual or proposed insurance contract or application 6 for insurance.
 - f. Having been convicted of a felony.
- g. Having admitted or been found to have committed any unfair insurance trade practice or fraud.
- 10 h. Using fraudulent, coercive, or dishonest 11 practices, or demonstrating incompetence, 12 untrustworthiness, or financial irresponsibility 13 in the conduct of business in this state or elsewhere.
- 14 i. Having a navigator license, or its equivalent, 15 denied, suspended, or revoked in any other state, 16 province, district, or territory.
- j. Forging another's name to an application for la insurance or to any document related to an insurance transaction.
- 20 k. Improperly using notes or any other reference 21 material to complete an examination for a navigator 22 license.
- 1. Failing to comply with an administrative or court order imposing a child support obligation.
- 25 m. Failing to comply with an administrative or 26 court order related to repayment of loans to the 27 college student aid commission.
- 28 n. Failing to pay state income tax or comply with 29 any administrative or court order directing payment of 30 state income tax.
- o. Failing or refusing to cooperate in an investigation by the commissioner.
- 2. If the commissioner does not renew a license or denies an application for a license, the commissioner shall notify the applicant or licensee and advise, in writing, the licensee or applicant of the reason for the nonrenewal of the license or denial of the application for a license. The licensee or applicant may request a hearing on the nonrenewal or denial. A hearing shall be conducted according to section 507B.6.
- 3. The license of a public or private entity
 42 operating as a navigator may be suspended, revoked,
 43 or refused if the commissioner finds, after hearing,
 44 that an individual navigator licensee's violation was
 45 known or should have been known by a partner, officer,
 46 or manager acting on behalf of the entity and the
 47 violation was not reported to the commissioner and
 48 corrective action was not taken.
- 49 4. In addition to, or in lieu of, any applicable 50 denial, suspension, or revocation of a license, a H-8414 -4-

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- 1 person, after hearing, may be subject to a civil 2 penalty as provided in section 522D.8.
- 5. The commissioner may conduct an investigation 4 of any suspected violation of this chapter pursuant 5 to section 507B.6 and may enforce the provisions and
- 6 impose any penalty or remedy authorized by this chapter
- 7 and chapter 507B against any person who is under
- 8 investigation for, or charged with, a violation of
- 9 either chapter even if the person's license has been
- 10 surrendered or has lapsed by operation of law.
- 6. a. In order to assure a free flow of
- 12 information for accomplishing the purposes of this
- 13 section, all complaint files, investigation files,
- 14 other investigation reports, and other investigative
- 15 information in the possession of the commissioner or
- 16 the commissioner's employees or agents that relates to
- 17 licensee discipline are privileged and confidential,
- 18 and are not subject to discovery, subpoena, or
- 19 other means of legal compulsion for their release
- 20 to a person other than the licensee, and are not
- 21 admissible in evidence in a judicial or administrative
- 22 proceeding other than the proceeding involving
- 23 licensee discipline. A final written decision of the
- 24 commissioner in a disciplinary proceeding is a public 25 record.
- b. Investigative information in the possession 26
- 27 of the commissioner or the commissioner's employees
- 28 or agents that relates to licensee discipline may
- 29 be disclosed, in the commissioner's discretion, to 30 appropriate licensing authorities within this state,
- 31 the appropriate licensing authority in another state,
- 32 the District of Columbia, or a territory or country in
- 33 which the licensee is licensed or has applied for a 34 license.
- 35
- c. If the investigative information in the 36 possession of the commissioner or the commissioner's
- 37 employees or agents indicates a crime has been
- 38 committed, the information shall be reported to the
- 39 proper law enforcement agency.
- 40 d. Pursuant to the provisions of section 17A.19,
- 41 subsection 6, upon an appeal by the licensee, the 42 commissioner shall transmit the entire record of the
- 43 contested case to the reviewing court.
- e. Notwithstanding the provisions of section
- 45 17A.19, subsection 6, if a waiver of privilege has
- 46 been involuntary and evidence has been received at a
- 47 disciplinary hearing, the court shall issue an order to
- 48 withhold the identity of the individual whose privilege
- 49 was waived.
- Sec. ___. NEW SECTION. 522D.8 Cease and desist 50

Page 6

1 orders ---- penalties.

- 2 1. A navigator who, after hearing, is found to have 3 violated this chapter, may be ordered to cease and 4 desist from engaging in the conduct resulting in the 5 violation and may be assessed a civil penalty pursuant 6 to chapter 507B.
- 7 2. If a person does not comply with an order issued 8 pursuant to this section, the commissioner may petition 9 a court of competent jurisdiction to enforce the order. 10 The court shall not require the commissioner to post 11 a bond in an action or proceeding under this section. 12 If the court finds, after notice and opportunity for 13 hearing, that the person is not in compliance with an 14 order, the court may adjudge the person to be in civil 15 contempt of the order. The court may impose a civil 16 penalty against the person for contempt in an amount 17 not less than three thousand dollars but not greater 18 than ten thousand dollars for each violation and may 19 grant any other relief that the court determines is 20 just and proper in the circumstances.
- 21 Sec. . NEW SECTION. 522D.9 Injunctive relief.
- 1. A person may bring an action in district court to enjoin another person from acting as a navigator in violation of section 522D.2. However, before bringing an action in district court to enjoin a person pursuant to this section, the person shall file a complaint with the insurance division alleging that another person is acting as a navigator in violation of section 522D.2.
- 29 2. If the division makes a determination to proceed 30 administratively against the person for a violation 31 of section 522D.2, the complainant shall not bring an 32 action in district court against the person pursuant to 33 this section based upon the allegations contained in 34 the complaint filed with the division.
- 35 3. If the division does not make a determination 36 to proceed administratively against the person for 37 a violation of section 522D.2, the division shall 38 issue, by ninety days from the date of filing of the 39 complaint, a release to the complainant that permits 40 the complainant to bring an action in district court 41 pursuant to this section.
- 42 4. The filing of a complaint with the division 43 pursuant to this section tolls the statute of 44 limitations pursuant to section 614.1 as to the alleged 45 violation for a period of one hundred twenty days from 46 the date of filing the complaint.
- 5. Any action brought in district court by a complainant against a person pursuant to this section, based upon the allegations contained in the complaint filed with the division, shall be brought within one

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Page
 1 year after the ninety-day period following the filing
2 of the complaint with the division, or the date of the
3 issuance of a release by the division, whichever is
4 earlier.
5
      6.
        If the court finds that the person is in
6 violation of section 522D.2 and enjoins the person from
7 acting as a navigator in violation of that section,
8 the court's findings of fact and law, and the judgment
9 and decree, when final, shall be admissible in any
10 proceeding initiated pursuant to section 522D.8 by the
11 commissioner against the person enjoined and the person
12 enjoined shall be precluded from contesting in that
13 proceeding the court's determination that the person
14 acted as a navigator in violation of section 522D.2.
     Sec. . NEW SECTION. 522D.10 Rules.
      The commissioner may adopt rules pursuant to
16
17 chapter 17A as are necessary or proper to carry out the
18 purposes of this chapter.
     Sec. . NEW SECTION. 522D.11 Severability.
19
     If any provision of this chapter or its application
20
21 to any person or circumstance is held invalid by a
22 court of competent jurisdiction or by federal law,
23 the invalidity does not affect other provisions or
24 applications of the chapter that can be given effect
25 without the invalid provision or application, and to
26 this end the provisions of the chapter are severable
27 and the valid provisions or applications shall remain
28 in full force and effect.
     Sec. ___. NEW SECTION. 522D.12 Future repeal.
29
     If the federal law requiring the establishment
30
31 of an exchange in each state is repealed by federal
32 legislation or is ruled invalid by a decision of the
33 United States supreme court, the commissioner shall
34 notify the Iowa Code editor of the effective date of
35 the repeal or the date of the ruling. This chapter
36 is repealed on the effective date of such federal
37 legislation or the date of the United States supreme
38 court decision.>
      3. Page 21, after line 18 by inserting:
39
40
      Sec. . EFFECTIVE DATE. The following provision
41 or provisions of this Act take effect July 1, 2013:
42
      1. The sections of this Act enacting chapter 522D.>
43
     4. By renumbering as necessary.
                             By HORBACH of Tama
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H-8406

- Amend the amendment, <u>H-8271</u>, to <u>Senate File 2295</u>, as
- 2 passed by the Senate, as follows:
- 3 1. Page 1, line 23, by striking <twenty> and
- 4 inserting <twenty-five>

By BALTIMORE of Boone R. OLSON of Polk

H-8406 FILED APRIL 3, 2012

SENATE FILE 2295

H - 8407

- Amend the amendment, $\frac{H-8271}{2}$, to Senate File 2295, as
- 2 passed by the Senate, as $\overline{\text{follows}}$:
- 3 1. Page 1, by striking lines 35 through 37 and
- 4 inserting:
- 5 <2. A conviction under this section shall not
- 6 constitute an offense requiring registration as a sex
- 7 offender under chapter 692A.>

By BALTIMORE of Boone

H-8407 FILED APRIL 3, 2012

H-8413

- Amend <u>Senate File 2315</u>, as amended, passed, and 2 reprinted by the Senate, as follows:
- 3 1. Page 1, by striking line 21 and inserting
- 4 < consult with take into account any related planning
- 5 <u>activities implemented by</u> the Iowa department of public 6 health, the state>
- 7 2. Page 1, line 29, by striking <incorporate> and 8 inserting <incorporate>
- 9 3. Page 1, line 30, after <services> by inserting 10 <take into account>
- 11 4. Page 2, line 7, by striking < Coordinate of > and 12 inserting < of Coordinate >
- 13 5. Page 2, line 10, by striking <to> and inserting 14 <to in connection with>
- 15 6. Page 3, line 7, by striking <331.440B.> and
- 16 inserting <331.438C. A performance-based contract
- 17 shall require a regional administrator to fulfill the
- 18 statutory and regulatory requirements of the regional
- 19 service system under this chapter and chapter 331. A
- 20 failure to fulfill the requirements may be addressed
- 21 by remedies specified in the contract, including but
- 22 not limited to suspension of contract payments or 23 cancellation of the contract. The contract provisions
- 24 may include but are not limited to requirements for
- 25 the regional service system to attain outcomes within
- 26 a specified range of acceptable performance in any of
- 27 the following categories:
- 28 (1) Access standards for the required core 29 services.
- 30 (2) Penetration rates for serving the number of 31 persons expected to be served.
- 32 (3) Utilization rates for inpatient and residential 33 treatment.
- 34 (4) Readmission rates for inpatient and residential 35 treatment.
- 36 (5) Employment of the persons receiving services.
- 37 (6) Administrative costs.
- 38 (7) Data reporting.
 - (8) Timely and accurate claims processing.>
- 40 7. Page 3, line 7, by striking <pursuant to> and 41 inserting <as described in>
- 42 8. Page 3, line 28, after <225C.6A, > by inserting 43 <unnumbered paragraph 1, >
- 9. Page 3, by striking line 30.
- 45 10. Page 3, line 31, before <The> by inserting <1.>
- 46 11. Page 3, after line 33 by inserting:
- 47 <Sec. . Section 225C.6A, subsections 1 through
- 48 3, Code 2011, are amended to read as follows:>
- 49 12. Page 4, line 6, by striking $\langle a. \underline{1.} \rangle$ and 50 inserting $\langle a. \rangle$
- H-8413

39

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Page
      13. Page 4, line 15, by striking <br/> 2.> and
 2 inserting <b.>
          Page 4, line 25, by striking <3.> and inserting
      14.
 4 <2.>
     15. By striking page 4, line 32, through page 5,
 6 line 8.
 7
      16. Page 5, after line 8 by inserting:
      <Sec. ___. Section 225C.6B, Code 2011, is amended
 9 by adding the following new subsection:
     NEW SUBSECTION. 3. State and regional disability
11 service systems. The publicly financed disability
12 services for persons with mental illness, intellectual
13 disability or other developmental disability, or
14 brain injury in this state shall be provided by
15 the department and the counties operating together
16 as regions. The financial and administrative
17 responsibility for such services is as follows:
      a. Disability services for children and adults
19 that are covered under the medical assistance program
20 pursuant to chapter 249A are the responsibility of the
21 state.
2.2
      b.
         Adult mental health and intellectual disability
23 services that are not covered under the medical
24 assistance program are the responsibility of the
25 county-based regional service system.>
      17. Page 5, line 16, by striking <department> and
27 inserting <director of human services, in consultation
28 with the commission, >
      18. Page 5, line 18, by striking <allowed growth>
30 and inserting <the increase in the costs of providing
31 services>
      19. Page 5, line 20, by striking <allocate> and
32
33 inserting <distribute>
      20. By striking page 5, line 27, through page 6,
35 line 1.
36
      21. Page 6, line 7, by striking <3, paragraph "c">
37 and inserting <<del>3, paragraph "c"</del> 2>
      22. By striking page 7, line 17, through page 8,
39 line 5, and inserting <state commission pursuant to
40 a recommendation made by the department. A regional
41 management plan shall include an annual service and
42 budget plan, a policies and procedures manual, and an
43 annual report. Each region's initial plan shall be
44 submitted to the department by April 1, 2014.
45
          Each region shall submit to the department
46 an annual service and budget plan approved by the
47 region's governing board. Provisions for the director
48 of human services' approval of the annual service and
49 budget plan, and any amendments to the plan, and other
50 requirements shall be specified in rule adopted by the
H-8413
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1 state commission. The provisions addressed in the 2 annual plan shall include but are not limited to all 3 of the following:

- 4 a. The region's budget and financing provisions for 5 the next fiscal year. The provisions shall address how 6 county, regional, state, and other funding sources will 7 be used to meet the service needs within the region.
- 8 b. The scope of services included in addition to 9 the required core services. Each service included 10 shall be described and projection of need and the 11 funding necessary to meet the need shall be included.
- 12 c. The location of the local access points for 13 services.
- 14 d. The plan for assuring effective crisis 15 prevention, response, and resolution.
- e. The provider reimbursement provisions. A
 region's use of provider reimbursement approaches in
 addition to fee-for-service reimbursement and for
 compensating the providers engaged in a systems of care
 approach and other nontraditional providers shall be
 encouraged. A region also shall be encouraged to use
 and the department shall approve funding approaches
 that identify and incorporate all services and
 sources of funding used by persons receiving services,
 including medical assistance program funding.
 - f. Financial forecasting measures.
- 27 g. The targeted case managers designated for the 28 region.
- 3. Each region shall submit an annual report to the department on or before December 1. The annual report shall provide information on the actual numbers of persons served, moneys expended, and outcomes achieved.
- 4. The region shall have in effect a policies and procedures manual for the regional service system. The manual shall be approved by the region's governing board and is subject to approval by the director of human services. An approved manual shall remain in seffect subject to amendment. An amendment to the manual shall be submitted to the department at least forty-five days prior to the date of implementation of the amendment. Prior to implementation of an amendment to the manual, the amendment must be approved by the director of human services in consultation with the state commission. The manual shall include but is not limited to all of the following:
- 46 a. A description of the region's policies and 47 procedures for financing and delivering the services 48 included in the annual service and budget plan.
 - b. The enrollment and eligibility process.
- 50 c. The method of annual service and budget plan

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26

- 1 administration.
- d. The process for managing utilization and access to services and other assistance. The process shall also describe how coordination between the services included in the annual service and budget plan and the disability services administered by the state and others will be managed.
- 8 e. The quality management and improvement 9 processes.
- 10 f. The risk management provisions and fiscal 11 viability of the annual service and budget plan, if the 12 region contracts with a private entity.
- g. The requirements for designation of targeted 13 14 case management providers and for implementation 15 of evidence-based models of case management. 16 requirements shall be designed to provide the person 17 receiving the case management with a choice of 18 providers, allow a service provider to be the case 19 manager but prohibit the provider from referring a 20 person receiving the case management only to services 21 administered by the provider, and include other 22 provisions to ensure compliance with but not exceed 23 federal requirements for conflict-free case management. 24 The qualifications of targeted case managers and other 25 persons providing service coordination under the 26 management plan shall be specified in the rules. The 27 rules shall also include but are not limited to all of 28 the following relating to targeted case management and 29 service coordination services:
- 30 (1) Performance and outcome measures relating to 31 the health, safety, work performance, and community 32 residency of the persons receiving the services.
- 33 (2) Standards for delivery of the services, 34 including but not limited to social history, 35 assessment, service planning, incident reporting, 36 crisis planning, coordination, and monitoring for 37 persons receiving the services.
- 38 (3) Methodologies for complying with the 39 requirements of this paragraph "g" which may include 40 the use of electronic recordkeeping and remote or 41 internet-based training.
- 42 h. A plan for a systems of care approach in which 43 multiple public and private agencies partner with 44 families and communities to address the multiple needs 45 of the persons and their families involved with the 46 regional service system.
- i. Measures to provide services in a decentralized 48 manner that utilize the strengths and assets of 49 the administrators and service providers within and 50 available to the region.

Page

- j. A plan for provider network formation and 2 management.
 - Service provider payment provisions. k.
- A process for resolving grievances. 4
- m. Measures for implementing interagency and 6 multisystem collaboration and care coordination.
- The provisions of a regional service system 8 management plan shall include measures to address the 9 needs of persons who have two>
- 23. Page 8, line 9, by striking <individuals> and 11 inserting <persons>
- 12 24. Page 8, after line 16 by inserting:
- < . If a county has been exempted pursuant to 13 14 section 331.438B from the requirement to enter into a 15 regional service system, the county and the county's 16 board of supervisors shall fulfill all requirements 17 under this chapter for a regional service system,
- 18 regional service system management plan, regional
- 19 governing board, and regional administrator, and any
- 20 other provisions applicable to a region of counties
- 21 providing local mental health and disability services.>
- 25. By striking page 8, line 24, through page 10, 22 23 line 13.
- 26. Page 10, by striking lines 17 and 18 and 25 inserting <in the core services required under section 26 331.439D, subject to the availability of funding.>
- 27 27. Page 11, line 7, by striking <disability 28 services> and inserting <regional service system>
- 28. Page 11, by striking lines 10 through 12 and 30 inserting <hundred percent of the federal poverty 31 level.>
- 29. Page 11, line 25, by striking <is fully able to 32 33 absorb the cost > and inserting < is not reimbursed for 34 the cost with public funds>
- 30. Page 11, line 34, after <commission> by 35 36 inserting <pursuant to a recommendation made by the 37 department>
- 31. Page 12, line 23, by striking <diagnosable> 38
- Page 12, line 24, after <disorder> by inserting 39
- 40 <or, in the opinion of a mental health professional,
- 41 may now have such a diagnosable disorder>
- 33. Page 13, lines 4 and 5, by striking <or other 42 43 developmental disability>
- Page 14, by striking lines 8 through 18 and 45 inserting <otherwise requires, "domain" means a set of 46 similar services that>
- 35. Page 14, line 19, by striking <an individual's> 47 48 and inserting <a person's>
- 36. Page 14, by striking line 23 and inserting:
- (2) The director of> 50

Page 6

- 1 37. Page 14, line 28, by striking <individuals> and 2 inserting <persons>
- 3 38. Page 14, line 30, by striking <individual> and 4 inserting <person>
- 5 39. Page 14, line 32, by striking <individual> and 6 inserting <person>
- 7 40. Page 14, line 34, by striking <(3) > and 8 inserting
b.>
- 9 41. Page 15, line 3, by striking <an individual> 10 and inserting <an individual person>
- 11 42. Page 15, line 6, by striking <individual> and 12 inserting <individual person>
- 13 43. Page 15, line 9, by striking <b.> and inserting 14 c.>
- 19 a. The person shall provide services and represent 20 the person as competent only within the boundaries 21 of the person's education, training, license, 22 certification, consultation received, supervised 23 experience, or other relevant professional experience.
- b. The person shall provide services in substantive areas or use intervention techniques or approaches that are new only after engaging in appropriate study, training, consultation, and supervision from a person who is competent in those areas, techniques, or approaches.
- 30 c. If generally recognized standards do not
 31 exist with respect to an emerging area of practice,
 32 the person shall exercise careful judgment and take
 33 responsible steps, including obtaining appropriate
 34 education, research, training, consultation, and
 35 supervision, in order to ensure competence and to
 36 protect from harm the persons receiving the services in
 37 the emerging area of practice.>
- 38 45. Page 16, line 32, by striking <crisis> and 39 inserting <facility and community-based crisis>
- 40 46. Page 17, by striking line 15 and inserting:
- 41 (3) Peer self-help drop-in centers.>
 - 47. Page 17, line 34, by striking <a.>
- 43 48. Page 18, by striking lines 9 through 25.
- 44 49. Page 19, line 5, by striking <331.439E> and 45 inserting <331.439D>
- 50. Page 19, line 26, after <department> by 47 inserting <of human services>
- 48 51. Page 19, after line 34 by inserting:
- 49 <3. a. The department of human services shall

50 create a transition committee of appropriate

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- 1 stakeholders with whom to consult on the transition
 2 from the current mental health and disability services
 3 system to the regional service system as provided
 4 in this Act. The transition committee shall make
 5 recommendations to the governor and general assembly
 6 concerning the efficacy of the property tax levy and
 7 other funding provisions for the regional service
 8 system, including measures for equalization payments,
 9 growth, and addressing the effects of population
 10 shifts among the counties. In addition, the transition
 11 committee shall consider the data collected for the
 12 current system and for the new regional system and
 13 whether improvements are warranted.

 14 b In designating the committee members the
- b. In designating the committee members, the director of human services shall consult with the chairpersons and ranking members of the committees on human resources of the senate and house of representatives and other members of the general assembly identified by the majority or minority leader of the senate or the speaker or minority leader of the house of representatives. In addition, the membership shall include four members of the general assembly, with one each appointed by the majority and minority leader of the senate and the speaker and minority leader of the house of representatives.>
- 26 52. Page 20, line 2, by striking <department of 27 human services> and inserting <department of public 28 health>
- 29 53. Page 20, line 9, by striking <director of human 30 services> and inserting <director of public health>
- 31 54. Page 20, line 12, after <representatives> by 32 inserting <and other members of the general assembly 33 identified by the majority or minority leader of the 34 senate or the speaker or minority leader of the house 35 of representatives>
- 36 55. Page 21, line 4, after <representatives> by 37 inserting <and other members of the general assembly 38 identified by the majority or minority leader of the 39 senate or the speaker or minority leader of the house 40 of representatives>

- 1 for children services to the Iowa plan. The report
 2 shall also provide a specific proposal for developing
 3 services in this state to meet the needs of children
 4 who are placed out-of-state due to the lack of
 5 treatment services in this state. The workgroup
 6 membership shall be expanded to include up to four
 7 legislators, with one each appointed by the majority
 8 leader and the minority leader of the senate and
 9 the speaker and the minority leader of the house of
 10 representatives.>
- 11 57. Page 24, by striking lines 12 through 15 and 12 inserting:
- 13 <1. a. Local access to mental health and 14 disability services for adults shall be provided either 15 by counties organized into a regional service system or 16 by individual counties that are exempted as provided 17 by this subsection. The department of human services 18 shall encourage counties to enter into a regional 19 system when the regional approach is likely to increase 20 the availability of services to residents of the state 21 who need the services. It is the intent of the general 22 assembly that the adult residents of this state should 23 have access to needed mental health and disability 24 services regardless of the location of their residence.
- b. The director of human services shall exempt a county from being required to enter into a regional service system if the county furnishes convincing evidence that the county complies with the requirements in subsection 3, paragraphs "d", "e", "f", and "g", and is able to provide the core services required by law to the county's residents in a more cost effective manner and with outcomes that are equal to or better than could be provided to the residents if the county would provide the services through a regional service system.
- 35 c. If a county has been exempted pursuant to
 36 this subsection from the requirement to enter into a
 37 regional service system, the county and the county's
 38 board of supervisors shall fulfill all requirements
 39 under this chapter and chapter 225C for a regional
 40 service system, regional service system management
 41 plan, regional governing board, and regional
 42 administrator, and any other provisions applicable to
 43 a region of counties providing local mental health and
 44 disability services.>
- 45 58. Page 24, by striking lines 20 and 21 and 46 inserting <to the minimum number of counties if there 47 is convincing evidence that>
- 48 59. Page 24, line 24, by striking <region> and 49 inserting <region, unless exempted pursuant to 50 subsection 1>

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- 1 60. Page 24, by striking lines 29 through 31.
- 2 61. Page 25, lines 1 and 2, by striking <with
- 3 assistance from psychiatric consultants> and inserting
- 4 <through contractual arrangements with mental health
- 5 professionals qualified to provide psychiatric
 6 services>
- 7 62. Page 26, line 7, by striking <region> and 8 inserting <region, unless exempted pursuant to 9 subsection 1>
- 10 63. Page 26, line 10, by striking <November 1, 11 2012> and inserting <April 1, 2013>
- 12 64. Page 26, line 11, by striking <June 30, 2015,> 13 and inserting <June 30, 2014, unless exempted pursuant 14 to subsection 1,>
- 15 65. Page 26, line 27, by striking <access> and 16 inserting <local access>
- 17 66. Page 27, line 8, by striking <with the 18 concurrence of> and inserting <in consultation with>
 - 67. Page 27, after line 13 by inserting:
- 20 <___. If the department determines that a region 21 or an exempted county is not adequately fulfilling the 22 requirements under this chapter for a regional service 23 system, the department shall address the region or 24 county in the following order:
- 25 a. Require compliance with a corrective action 26 plan.
- 27 b. Reduce the amount of the annual state funding 28 provided for the regional service system, not to exceed 29 fifteen percent of the amount.
- 30 c. Withdraw approval for the region or for the 31 county exemption, as applicable.>
- 32 68. Page 27, by striking lines 25 through 34 and 33 inserting:
- 34 <b. The membership of the governing board shall</p>
 35 also include one individual who utilizes mental health
- 36 and disability services or is an actively involved
- 37 relative of such an individual. This member shall
- 38 be designated by the advisory committee or committees
- 39 formed by the governing board purusant to this section.
- 40 The member designated in accordance with this paragraph
- 41 shall serve in a nonvoting, ex officio capacity.>
- 42 69. Page 28, by striking lines 2 through 9 and 43 inserting:
- 44 <d. The membership of the governing board shall
- 45 also consist of one member representing service
- 46 providers in the region. This member shall be
- 47 designated by the advisory committee or committees
- 48 formed by the governing board pursuant to this section.
- 49 The member designated in accordance with this paragraph
- 50 shall serve in a nonvoting, ex officio capacity.>

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      70. Page 28, line 14, after <3.> by inserting <a.>
      71. Page 28, line 16, after <department> by
 3 inserting <in accordance with section 225C.4,
 4 subsection 1, paragraph "u">
          Page 28, after line 22 by inserting:
          The regional administrator staff shall
 6
      <b.
 7 include one or more coordinators of disability
 8 services. A coordinator shall possess a bachelor's
 9 or higher level degree in a human services-related
10 or administrative-related field, including but not
11 limited to social work, psychology, nursing, or public
12 or business administration, from an accredited college
13 or university. However, in lieu of a degree in public
14 or business administration, a coordinator may provide
15 documentation of relevant management experience. An
16 action of a coordinator involving a clinical decision
17 shall be made in conjunction with a professional who
18 is trained in the delivery of the mental health or
19 disability service addressed by the clinical decision.
20 The regional administrator shall determine whether
21 referral to a coordinator of disability services is
22 required for a person seeking to access a service
23 through a local access point of the regional service
24 system.>
25
      73. Page 31, line 29, by striking <in the county>
      74. Page 31, line 35, by striking <a> and inserting
26
27 <the>
28
      75. Page 32, after line 8 by inserting:
29
      < . "Mental health professional" means the same as
30 defined in section 228.1.>
      76. Page 32, lines 11 and 12, by striking <service
32 authorization or other services-related determination>
33 and inserting <a dispute regarding a service
34 authorization or other services-related decision>
      77. Page 32, after line 16 by inserting:
35
      <3. If a service authorization or other
37 services-related decision made by a regional
38 administrator concerning a person varies from the
39 type and amount of service identified to be necessary
40 for the person in a clinical determination made by
41 a mental health professional and the mental health
42 professional believes that failure to provide the
43 type and amount of service identified could cause an
44 immediate danger to the person's health, safety, or
45 welfare, the person may request an expedited review of
46 the regional administrator's decision to be made by the
47 department of human services. An expedited review held
48 in accordance with this subsection is subject to the
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50 a. The request for the expedited review shall -10-

49 following procedures:

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1 be filed within five business days of receiving the 2 notice of decision by the regional administrator. The 3 request must be in writing, plainly state the request 4 for an expedited review in the caption and body of the 5 request, and be supported by written documentation from 6 the mental health professional who made the clinical 7 determination stating how the notice of decision 8 on services could cause an immediate danger to the 9 person's health, safety, or welfare.

- b. The expedited review shall be performed by 11 a mental health professional, who is either the 12 administrator of the division of mental health 13 and disability services of the department of human 14 services or the administrator's designee. If the 15 administrator is not a mental health professional, the 16 expedited review shall be performed by a designee of 17 the administrator who is a mental health professional 18 and is free of any conflict of interest to perform 19 the expedited review. The expedited review shall be 20 performed within two business days of the time the 21 request is filed. The regional administrator and 22 the person, with the assistance of the mental health 23 professional who made the clinical determination shall 24 each provide a brief statement of facts, conclusions, 25 and reasons for the decision made. Supporting clinical 26 information shall also be attached. All information 27 related to the proceedings and any related filings 28 shall be considered to be mental health information 29 subject to chapter 228.
- 30 c. The administrator or designee shall issue an 31 order, including a brief statement of findings of fact, 32 conclusions of law, and policy reasons for the order, 33 to justify the decision made concerning the expedited 34 review. If the decision concurs with the contention 35 that there is an immediate danger to the person's 36 health, safety, or welfare, the order shall identify 37 the type and amount of service which shall be provided 38 for the person. The administrator or designee shall 39 give such notice as is practicable to persons who 40 are required to comply with the order. The order is 41 effective when issued.
- d. The decision of the administrator or designee
 shall be considered a final agency action and is
 subject to judicial review in accordance with section
 for 17A.19. The record for judicial review consists of any
 decouments regarding the matter that were considered
 for prepared by the administrator or designee. The
 administrator or designee shall maintain these
 decouments as the official record of the decision. If
 the matter is appealed to the district court, the
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- 1 record shall be filed as confidential.>
- 2 78. Page 32, line 16, by striking <a final agency
- 3 decision> and inserting <final agency action>
- 4 79. Page 32, line 17, by striking <3.> and 5 inserting <4.>
- 6 80. Page 32, line 29, by striking <4.> and 7 inserting <5.>
- 8 81. Page 33, line 10, by striking <section> and 9 inserting <subsection>
- 10 82. Page 33, line 30, by striking <is a> and 11 inserting <shall be considered>
- 12 83. Page 34, line 4, by striking <section> and 13 inserting <subsection>
- 14 84. Page 34, line 25, by striking <decision> and 15 inserting <determination>
 - 85. Page 35, after line 19 by inserting:
- 17 < . "Mental health services" means services
- 18 provided by a mental health professional operating
- 19 within the scope of the professional's practice which
- 20 address mental, emotional, medical, or behavioral
- 21 problems.>
- 22 86. Page 35, by striking lines 24 through 28.
- 23 87. Page 35, by striking lines 33 through 35 and
- 24 inserting <or older and has been determined by a mental
- 25 health professional to need subacute mental health 26 services.>
- 27 88. Page 36, by striking lines 4 through 9 and
- 28 inserting <of egress providing subacute mental health
- 29 services for a period exceeding twenty-four consecutive
- 30 hours to persons in need of the services.>
 - 89. Page 36, before line 10 by inserting:
- 32 <___. "Subacute mental health services" means the 33 same as defined in section 225C.6.>
- 34 90. Page 36, line 24, by striking <the residents>
- 35 and inserting <persons with serious and persistent
- 36 mental illness so that the persons are able to
- 37 experience recovery and live successfully in the
- 38 community>
- 39 91. Page 36, line 29, by striking <psychiatric> and
- 40 inserting <subacute mental health>
- 92. Page 37, by striking line 4 and inserting <each 42 resident as medically necessary and shall be>
- 43 93. Page 37, by striking lines 7 through 9 and
- 44 inserting <be provided by a mental health professional.
- 45 The>
- 94. Page 37, by striking lines 15 through 20.
- 95. Page 38, by striking lines 6 through 11 and
- 48 inserting:
- 49 <The department shall issue a license to an
- 50 applicant under this chapter if the following

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- 1 conditions exist:
- 1. The department has ascertained that the 3 applicant's facilities and staff are adequate to 4 provide the care and services required of a subacute 5 care facility.
- 2. a. The department of human services has 7 submitted written approval of the application based 8 upon the process used by the department of human 9 services to identify the best qualified providers. 10 department of human services shall utilize a request 11 for proposals process to identify the best qualified 12 providers, limit the number of subacute care facility 13 beds, and ensure the geographic dispersion of subacute 14 mental health services.
- b. The department of human services shall not give 16 approval to an application which would cause the number 17 of subacute care facility beds licensed under this 18 chapter to exceed fifty beds.
- c. The subacute care facility beds identified by 19 20 the request for proposals process shall be existing 21 beds which have been awarded a certificate of need 22 pursuant to chapter 135. Such beds shall not be 23 required to obtain an additional certificate of need 24 upon conversion to licensed subacute care facility 25 beds.>
- Page 39, line 15, by striking <The> and 26 96. 27 inserting:
- <1. The department of inspections and appeals and 28 29 the department of human services shall collaborate in 30 establishing standards for licensing of subacute care 31 facilities to achieve all of the following objectives:
- a. Subacute mental health services are provided 32
- 33 based on sound, proven clinical practice.
- b. Subacute mental health services are established 35 in a manner that allows the services to be included in 36 the federal medical assistance state plan.
- 37 It is the intent of the general assembly that 38 subacute mental health services be included in the 39 Medicaid state plan adopted for the implementation of 40 the federal Patient Protection and Affordable Care Act, 41 benchmark plan.
 - 3. The>

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- 97. Page 39, line 25, by striking <--44 confidentiality>
- 98. By striking page 39, line 33, through page 40, 46 line 3, and inserting <or prior to the inspection.>
- 99. Page 42, by striking lines 18 through 24 and 48 inserting <After the respondent's admission, the 49 observation, medical treatment, and hospital care
- 50 of the respondent may be provided by a mental health H-8413 -13-

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1 professional, as defined in section 228.1, who is
2 licensed as a physician, advanced registered nurse
3 practitioner, or physician assistant.>

4 100. Page 42, by striking lines 25 through 35 and 5 inserting:

6 <Sec. ____. Section 225C.6, Code Supplement 2011, is
7 amended by adding the following new subsection:</pre>

8 <u>NEW SUBSECTION</u>. 4. a. The department shall 9 coordinate with the department of inspections and 10 appeals in the establishment of facility-based and 11 community-based, subacute mental health services.

- b. A person shall not provide community-based, subacute mental health services unless the person has been accredited to provide the services. The commission shall adopt standards for subacute mental health services and for accreditation of providers of community-based, subacute mental health services.
- 18 c. As used in this subsection, "subacute mental 19 health services" means all of the following:
- (1) A comprehensive set of wraparound services for 20 21 persons who have had or are at imminent risk of having 22 acute or crisis mental health symptoms that do not 23 permit the persons to remain in or threatens removal 24 of the persons from their home and community, but who 25 have been determined by a mental health professional 26 and a licensed health care professional, subject to 27 the professional's scope of practice, not to need 28 inpatient acute hospital services. For the purposes of 29 this subparagraph, "mental health professional" means 30 the same as defined in section 228.1 and "licensed 31 health care professional" means a person licensed 32 under chapter 148 to practice medicine and surgery 33 or osteopathic medicine and surgery, an advanced 34 registered nurse practitioner licensed under chapter 35 152 or 152E and registered with the board of nursing, 36 or a physician assistant licensed to practice under the 37 supervision of a physician as authorized in chapters 38 147 and 148C.
- 39 (2) Intensive, recovery-oriented treatment and 40 monitoring of the person with direct or remote access 41 to a psychiatrist, psychiatric advanced registered 42 nurse practitioner, or nurse as needed.
- 43 (3) An outcome-focused, interdisciplinary approach 44 designed to return the person to living successfully 45 in the community.
- 46 (4) Services that may be provided in a wide array 47 of settings ranging from the person's home to a 48 facility providing subacute mental health services.
- 49 (5) Services that are time limited to not more 50 than ten days or another time period determined in -14-

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- 1 accordance with rules adopted for this purpose.
- 2 d. Subacute mental health services and the 3 standards for the services shall be established in
- 4 a manner that allows for accessing federal Medicaid
- 5 funding.
- 6 Sec. ___. SUBACUTE MENTAL HEALTH SERVICES ----
- 7 REIMBURSEMENT METHODOLOGY. The department of human
- 8 services shall develop a reimbursement methodology for
- 9 subacute mental health services, as defined in this
- 10 division of this Act. It is the intent of the general
- 11 assembly that the reimbursement methodology will take
- 12 effect during the fiscal year beginning July 1, 2012,
- 13 and result in an initial reimbursement rate in the
- 14 range of \$400 to \$500 per day. Such rate shall be
- 15 subject to annual adjustment as provided by law.>
- 16 101. Page 43, after line 7 by inserting:
- 17 <Sec. . STATE AGENCY ACTIVITIES CONCERNING
- 18 SUBACUTE, CRISIS STABILIZATION, AND RESIDENTIAL CARE
- 19 FACILITY SERVICES.
- 1. The department of human services shall work with the departments of public health and inspections
- 22 and appeals and other relevant stakeholders to
- 23 identify appropriate definitions and other regulatory
- 24 provisions to address residential care facilities and
- 25 both facility and nonfacility subacute and crisis
- 26 stabilization services. The department shall consider
- 27 the experience of the crisis stabilization program
- 28 pilot project authorized by this division of this
- 29 Act in identifying regulatory provisions for such
- 30 programs. The appropriate department shall adopt rules
- 31 to implement the provisions identified.
- 32 2. It is the intent of the general assembly that
- 33 the Medicaid state plan adopted for the implementation
- 34 of the federal Patient Protection and Affordable Care
- 35 Act, Pub. L. No. 111-148, will include coverage of
- 36 both facility and nonfacility subacute and crisis
- 37 stabilization services.
- 38 3. The department of human services shall work
- 39 with the entity under contract with the department
- 40 to provide mental health managed care under the
- 41 medical assistance program to ensure there is adequate
- 42 reimbursement of both facility and nonfacility subacute
- 43 and crisis stabilization services.>
- 14 102. Page 43, before line 8 by inserting:
- 45 <Sec. ___. CRISIS STABILIZATION PROGRAM PILOT
- 46 PROJECT.
- 1. The department of human services shall authorize
- 48 a facility-based, crisis stabilization program pilot
- 49 project implemented by the regional service network
- 50 initiated pursuant to 2008 Iowa Acts, chapter 1187,

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Page 16

1 section 59, subsection 9. The facility operated by 2 the program shall not be required to be licensed under 3 chapter 135B or 231C. The purpose of the pilot project 4 is to provide a prototype for the departments of human 5 services, inspections and appeals, and public health 6 to develop regulatory standards for such programs 7 and facilities. The pilot project shall comply with 8 appropriate standards associated with funding of the 9 services provided by the project that are identified 10 by the department of human services. The facility 11 shall be limited to not more than 10 beds and shall be 12 authorized to operate through June 30, 2013.

The network, in cooperation with the departments 13 2. 14 of human services, inspections and appeals, and 15 public health, shall report to the governor, the 16 general assembly, and the legislative services agency 17 concerning the pilot project on or before December 14, 18 2012, providing findings and recommendations. 19 report shall include recommendations for criteria 20 concerning admissions, staff qualifications, staffing 21 levels, exclusion and inclusion of service recipients, 22 lengths of stays, transition between services, and 23 facility requirements, and for goals and objectives for 24 such programs and facilities.>

103. Page 43, after line 9 by inserting: <DIVISION

CO-OCCURRING CONDITIONS

Section 125.10, subsection 3, Code 29 Supplement 2011, is amended to read as follows:

30 3. Coordinate the efforts and enlist the assistance 31 of all public and private agencies, organizations and 32 individuals interested in the prevention of substance 33 abuse and the treatment of substance abusers, chronic 34 substance abusers, and intoxicated persons. 35 director's actions to implement this subsection shall 36 also address the treatment needs of persons who have 37 a mental illness, an intellectual disability, brain 38 injury, or other co-occurring condition in addition to 39 a substance-related disorder.

Sec. . Section 125.12, subsection 3, Code 40 41 Supplement 2011, is amended to read as follows:

The director shall provide for adequate and 42 3. 43 appropriate treatment for substance abusers, chronic 44 substance abusers, intoxicated persons, and concerned 45 family members admitted under sections 125.33 and 46 125.34, or under section 125.75, 125.81, or 125.91. 47 Treatment shall not be provided at a correctional 48 institution except for inmates. A mental health 49 professional, as defined in section 228.1, who is

50 employed by a treatment provider under the program

25

26 27

- Page 17 1 may provide treatment to a person with co-occurring 2 substance-related and mental health disorder. Such 3 treatment may also be provided by a person employed 4 by such a treatment provider who is receiving the 5 supervision required to meet the definition of 6 mental health professional but has not completed the 7 supervision component. Sec. . Section 226.10, Code 2011, is amended to 9 read as follows: 10 226.10 Equal treatment. The several patients of the state mental health 11 12 institutes, according to their different conditions 13 of mind and body, and their respective needs, shall 14 be provided for and treated with equal care. If in 15 addition to mental illness a patient has a co-occurring 16 intellectual disability, brain injury, or substance 17 abuse disorder, the care provided shall also address 18 the co-occurring needs.> 104. Page 43, before line 10 by inserting: 19
- <Sec. . EFFECTIVE UPON ENACTMENT. The following 20 21 provision or provisions of this Act, being deemed of 22 immediate importance, take effect upon enactment:
- 1. The section of this Act authorizing a crisis 24 stabilization program pilot project.>
 - 105. Page 74, after line 13 by inserting:

<DIVISION

PROPERTY TAX RELIEF PROVISIONS

NEW SECTION. 331.424D County mental 28 29 health and disabilities services fund.

- 1. For the purposes of this chapter and chapter 31 426B, unless the context otherwise requires:
- a. "Base year expenditures for mental health and 32 33 disabilities services" means the same as defined in 34 section 331.438, Code Supplement 2011, minus the amount 35 the county received from the property tax relief fund 36 pursuant to section 426B.1, Code 2011, for the fiscal 37 year beginning July 1, 2012.
- b. "County population expenditure target amount" 39 means the product of the statewide per capita 40 expenditure target amount multiplied by a county's 41 general population.
- "County services fund" means a county mental 42 43 health and disabilities services fund created pursuant 44 to this section.
- d. "Per capita growth amount" means the amount by 46 which the statewide per capita expenditure target 47 amount may grow from one year to the next.
- "Statewide per capita expenditure target amount" e. 49 means the dollar amount of a statewide expenditure 50 target per person as established by statute.

- 1 2. The county finance committee created in section 2 333A.2 shall consult with the department of human 3 services and the department of management in adopting 4 rules and prescribing forms for administering the 5 county services funds.
- 3. a. For the fiscal year beginning July 1, 2013, 7 and succeeding fiscal years, revenues from taxes 8 and other sources designated by a county for mental 9 health and disabilities services shall be credited 10 to a mental health and disabilities services fund 11 which shall be created by the county. The board shall 12 make appropriations from the county services fund 13 for payment of services provided under the regional 14 service system management plan approved pursuant to 15 section 331.439A. The county may pay for the services 16 in cooperation with other counties by combining 17 appropriations from the county services fund with 18 appropriations from the county services funds of other 19 counties, through the county's regional administrator, 20 or through another arrangement specified in the 21 regional governance agreement entered into by the 22 county under section 331.438E.
- 23 b. Appropriations specifically authorized to be 24 made from the county services fund shall not be made 25 from any other fund of the county.
- 4. For the fiscal year beginning July 1, 2013, and succeeding fiscal years, receipts from the state or federal government for the mental health and disabilities services administered or paid for by a county shall be credited to the county services fund, including moneys distributed to the county through the department of human services and moneys distributed pursuant to chapter 426B to the county for property tax relief.
- 5. a. For the fiscal year beginning July 1, 2013, and for each subsequent fiscal year, the county shall certify a levy for payment of services from the county services fund. For each fiscal year, county revenues from taxes levied by the county and credited to the county services fund shall not exceed an amount equal to the county's base year expenditures for mental health and disabilities services.
- b. The county auditor and the board of supervisors 44 shall certify the levy for the county services fund as 45 required by paragraph "a". A levy certified under this 46 subsection is not subject to the provisions of section 47 331.426 or to any other provision in law authorizing a 48 county to exceed, increase, or appeal a property tax 49 levy limit.
- 50 Sec. ___. Section 331.432, subsection 3, Code H-8413 -18-

- 1 Supplement 2011, is amended to read as follows:
- 3. Except as authorized in section 331.477,
- 3 transfers of moneys between the county mental health,
- 4 mental retardation, and developmental disabilities
- 5 services fund created pursuant to section 331.424D and
- 6 any other fund are prohibited.
- Sec. . Section 426B.1, subsection 2, Code 2011,
- 8 is amended by striking the subsection and inserting in
- 9 lieu thereof the following:
- 2. Moneys shall be distributed from the property
- 11 tax relief fund to counties for the mental health and 12 disability regional service system for providing county
- 13 base property tax equivalent equalization payments and
- 14 the per capita growth amount established pursuant to
- 15 section 426B.3, in accordance with the appropriations
- 16 made to the fund and other statutory requirements.
- Sec. ___. Section 426B.2, subsections 1 and 2, Code 18 2011, are amended by striking the subsections.
- Sec. . Section 426B.2, subsection 3, Code 2011,
- 20 is amended to read as follows:
- 3. a. The director of human services shall draw
- 22 warrants on the property tax relief fund, payable to
- 23 the county treasurer in the amount due to a county in
- 24 accordance with subsection 1 section 426B.3, and mail
- 25 the warrants to the county auditors in July and January
- 26 of each year.
- 27 b. Any replacement generation tax in the property
- 28 tax relief fund as of May 1 shall be paid to the
- 29 county treasurers in July and January of the fiscal
- 30 year beginning the following July 1. The department 31 of management shall determine the amount each county
- 32 will be paid pursuant to this lettered paragraph
- 33 for the following fiscal year. The department shall
- 34 reduce by the determined amount the amount of each
- 35 county's certified budget to be raised by property
- 36 tax for that fiscal year which is to be expended for
- 37 mental health, mental retardation, and developmental
- 38 disabilities services and shall revise the rate of
- 39 taxation as necessary to raise the reduced amount. The
- 40 department of management shall report the reduction in
- 41 the certified budget and the revised rate of taxation
- 42 to the county auditors by June 15.
- Sec. . Section 426B.3, Code 2011, is amended by
- 44 striking the section and inserting in lieu thereof the 45 following:
- 46 426B.3A Per capita funding.
- 1. Commencing with the fiscal year beginning July 47
- 48 1, 2013, the state and county funding for the mental
- 49 health and disability services administered or paid for
- 50 by counties shall be provided based on a statewide per H-8413 -19-

- 1 capita expenditure target amount computed in accordance 2 with this section.
- 3 2. The statewide per capita expenditure target 4 amount shall consist of the sum of the following:
- 5 a. A county base property tax equivalent to 6 forty-seven dollars and twenty-eight cents per capita.
- 7 Each per capita growth amount established by statute
- 8 as provided in paragraph "b", shall be added to this 9 amount.
- 10 b. A per capita growth amount, which may be stated 11 as a percentage of the prior fiscal year's county base 12 property tax per capita amount, as established by 13 statute.
- 14 3. The per capita growth amount established 15 by statute shall provide funding for increases in 16 non-Medicaid expenditures from county services funds 17 due to service costs, additional service populations, 18 additional core service domains, and numbers of persons 19 receiving services.
- 4. a. For the fiscal year beginning July 1, 2013, 21 and succeeding fiscal years, a county with a county 22 population expenditure target amount that exceeds 23 the amount of the county's base year expenditures for 24 mental health and disabilities services shall receive 25 an equalization payment for the difference.
- 26 b. The equalization payments determined in 27 accordance with this subsection shall be made by the 28 department of human services for each fiscal year as 29 provided in appropriations made from the property tax 30 relief fund for this purpose.
- 31 Sec. ___. REPEAL. Section 426B.6, Code Supplement 32 2011, is repealed.
- 33 Sec. ___. EFFECTIVE DATE. The following provisions 34 of this division of this Act takes effect July 1, 2013:
- 1. The section of this Act amending section 36 331.432.
- 37 2. The section of this Act amending section 426B.1.
- 38 3. The sections of this Act amending section 39 426B.2.
- 40 4. The section of this Act amending section 426B.3.
- 41 Sec. . APPLICABILITY. The following provisions
- 42 of this division of this Act are applicable commencing 43 with the budget and tax levy certification process for
- 44 the fiscal year beginning July 1, 2013:
- 1. The section of this Act amending section 426B.1.
- 46 2. The sections of this Act amending section 47 426B.2.
- 48 3. The section of this Act amending section 49 426B.3.>
- 50 106. Title page, line 4, after <regions> by H-8413 -20-